

North Dakota Office of State Tax Commissioner  
**Application For Domestic Winery or  
Alcoholic Beverage Manufacturing License**



For Year \_\_\_\_\_

<input type="checkbox"/> <b>New</b>		<input type="checkbox"/> <b>Renewal</b>		ND License Number (renewals only)	
Legal Name			FEIN		
DBA/Trade Name			Federal Basic Permit Number		
Physical Address		City	State	Zip Code	
Mailing Address		City	State	Zip Code	
Telephone Number		Contact Person			
<input type="checkbox"/> Address Changed From Previous License Application		Email Address			

<b>Type of Business:</b> <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation
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**Annual Fees:** Initial Filers are eligible for prorated fees based on the following table:

	April - June 30	July 1 - December 31
<input type="checkbox"/> Domestic Winery (\$100.00) .....	\$100.00	\$100.00
<input type="checkbox"/> Microbrew Pub (\$500.00) .....	\$375.00	\$250.00
ND Manufacturing (\$500.00) .....	\$375.00	\$250.00

☐ Winery  
☐ Distillery  
☐ Brewery

1. Do you have any financial interest in any wholesale or retail beer or liquor establishment? (If corporation, this includes all officers, directors, and stockholders; if a partnership, this includes all partners.) ..... ☐ Yes    ☐ No

If yes, list establishments \_\_\_\_\_

2. Have you ever had any type of license suspended or revoked in North Dakota or in any other state? ..... ☐ Yes    ☐ No

If yes, list where and when \_\_\_\_\_

**Agreement to Electronically File**

The Tax Commissioner agrees to authorize the above named company to electronically file the tax reports and schedules as required under North Dakota Century Code chs. 5-01 and 5-03. The signature of the company affixed to this application shall be deemed to appear on such electronically filed reports and schedules, as if actually so appearing. All reports and schedules filed electronically pursuant to this agreement are deemed by the company to be truthful, accurate and complete statements made under penalty of perjury, and shall be in form compatible with the Tax Commissioner's equipment, software, and facilities. Any electronic filing not in conformity with the requirements specified herein shall be deemed a failure to file such reports and schedules and company shall be subject to all applicable penalties prescribed by law.

I declare under the penalties of North Dakota Century Code § 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this application has been examined by me and to the best of my knowledge and belief is complete, correct, and true.

\_\_\_\_\_  
Name of Owner or Authorized Officer (print or type)

\_\_\_\_\_  
Signature of Owner or Authorized Officer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**Please send application and license fee to:**

**Office of State Tax Commissioner  
Alcohol Tax Section  
600 E. Boulevard Ave. Dept. 127  
Bismarck, ND 58505-0599  
Phone: (701) 328-2702**

**For Tax  
Department  
Use Only**